

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	17625-0049
	Named Inventor(s)	Raymond P. Vito
	Title	Autologous Vascular Grafts Created By Vessel Distension
	Express Mail Label No.	EV 330772372 US

APPLICATION ELEMENTS	ADDRESS TO: Commissioner for Patents Box Patent Application Washington, D.C. 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification, Claims, and Abstract Total Pages 38 4. <input checked="" type="checkbox"/> Drawings Total Sheets 13 5. Oath or Declaration Total Pages 3 a. <input type="checkbox"/> Unexecuted (original or copy) b. <input checked="" type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 19 completed)</i> (i) <input checked="" type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input checked="" type="checkbox"/> Incorporation by Reference <i>(usable if Box 5b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 7. <input type="checkbox"/> Nonpublication Request Under 35 U.S.C. 122(b)(2)(B)(i). <input type="checkbox"/> Form PTO/SB/35 8. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 9. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	10. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies 11. <input type="checkbox"/> Assignment: a. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) b. <input type="checkbox"/> Assignment is of record in parent application No. 12. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney by assignee 13. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 14. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) PTO- 1449 <input type="checkbox"/> Copies of IDS Citations 15. <input type="checkbox"/> Preliminary Amendment 16. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 17. <input type="checkbox"/> Certified Copy of Priority Document(s) 18. <input checked="" type="checkbox"/> Other: <u>Check for \$480.00</u> _____ _____
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19. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:
☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: **09/994,241**
 Prior application information: Examiner: **RAM, J.** Group Art Unit: **3739**
 Recite complete dependency back to first parent application: **Cont. of 09/994,241, which is a CIP of 09/322,095.**

20. CORRESPONDENCE ADDRESS: Kevin W. King, Esq. SUTHERLAND ASBILL & BRENNAN LLP 999 Peachtree Street, NE Atlanta, Georgia 30309-3996	By: <u><i>Kevin W. King</i></u> Date: June 23, 2003 Telephone: 404-853-8000 Facsimile: 404-853-8806	Reg. No. 42,737
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17525 U.S. PTO

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06/23/03



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PATENT TRADEMARK OFFICE



06/23/03

FEE TRANSMITTAL

Attorney Docket No. 17625-0049

This sheet accompanies a patent application transmittal for the following application:

Inventor(s): **Raymond P. Vito**

Filing Date: **June 23, 2003**

Title: **AUTOLOGOUS VASCULAR GRAFTS CREATED BY VESSEL DISTENSION**

The filing fee is calculated as shown below:

1. **FILING FEE:**

SMALL ENTITY			LARGE ENTITY	
FOR:	FEE	FEE PAID	FEE	FEE PAID
<input checked="" type="checkbox"/> UTILITY FILING FEE	\$370	375.00	\$740	
<input type="checkbox"/> DESIGN FILING FEE	\$165		\$330	
<input type="checkbox"/> PLANT FILING FEE	\$255		\$510	
<input type="checkbox"/> REISSUE FILING FEE	\$370		\$740	
<input type="checkbox"/> PROVISIONAL FILING FEE	\$80		\$160	
SUBTOTAL (1)		\$375.00		\$

2. **CLAIMS:**

SMALL ENTITY					LARGE ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE	RATE	FEE
TOTAL CLAIMS	27 - 20 =	7	x 9 =	\$63.00	x 18 =	
INDEP. CLAIMS	4- 3 =	1	x 42 =	\$42.00	x 84 =	
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+140 =		+280 =	
SUBTOTAL (2)				\$105.00		\$

3. **ADDITIONAL FEES:**

SMALL ENTITY			LARGE ENTITY	
FOR:	FEE	FEE PAID	FEE	FEE PAID
<input type="checkbox"/> LATE FILING, FEE OR OATH	\$65	0.00	\$130	
<input type="checkbox"/> NON-ENGLISH SPECIFICATION	\$130		\$130	
<input type="checkbox"/> OTHER				
SUBTOTAL (3)		\$0.00		\$

TOTAL FILING FEES: \$480.00

A check is enclosed for the total amount: **\$480.00**

☒ Charge any additional fees required under 37 C.F.R. 1.16 or 1.17 to Deposit Account 19-5029.

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By: Kevin W. King Date: June 23, 2003

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